

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??:

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: LASER DRIVER AND OPTICAL DISK  
SYSTEM

Attorney Docket Number:: 16869P-097600US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 25

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Koichiro  
Middle Name::  
Family Name:: Nishimura  
Name Suffix::  
City of Residence:: Ebina  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address:: New Marunouchi Bldg., 5-1  
Postal Address Line Two:: Marunouchi 1-chome  
Postal Address Line Three:: Chiyoda-ku  
City of Mailing Address:: Tokyo  
State or Province of mailing address::  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address:: 100-8220

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Manabu  
Middle Name::  
Family Name:: Katsuki  
Name Suffix::  
City of Residence:: Yokohama  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address:: New Marunouchi Bldg., 5-1  
Postal Address Line Two:: Marunouchi 1-chome  
Postal Address Line Three:: Chiyoda-ku  
City of Mailing Address:: Tokyo

State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 100-8220

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Toshimitsu

Middle Name::

Family Name:: Kaku

Name Suffix::

City of Residence:: Sagamihara

State or Province of Residence::

Country of Residence:: Japan

Street of Mailing Address:: New Marunouchi Bldg. 5-1

Postal Address Line Two:: Marunouchi 1-chome

Postal Address Line Three:: Chiyoda-ku

City of Mailing Address:: Tokyo

State or Province of mailing address::

Country of mailing address:: Japan

Postal or Zip Code of mailing address:: 100-8220

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::
Japan	2003-144257	05/22/03

**Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::